

0 5 2 3

9 0

Reference

Date

For internal BSSPD use only:



Originator's identification number

Instruction to your Bank or Building Society to pay Direct Debit.

Please fill in the form in black ink and return to: Mrs Kirstin Berridge BSSPD Administrator PO Box 179 Llverpool L17 6XA

To the Manager (name of Bank or Building Society)

	Postcode		
Name of Account Holder(s)			
Account number	Sort code [_] [_] [_]		

Instructions to your Bank or Building Society:

Please pay Bank of Scotland Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with BSSPD and if so, details will be passed electronically to my Bank or Building Society.

Signature___

Banks and Building	Societies may r	ot accent Direct	Debit instructions	for some types	of account
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I ne Di	rect Debit guarantee
•	This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.
•	If the amounts to be paid or the payment dates change, BSSPD will notify you 10 working days in advance of your account being debited or as otherwise agreed.
•	If an error is made by BSSPD or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
•	You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy of your letter to us.